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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 10/357,995 02/04/2003 PAT 6,720,333
 which is a CON of 10/165,229 06/07/2002 PAT 6,545,016
 which is a CIP of 10/016,073 12/06/2001 ABN
 which claims benefit of 60/254,228 12/08/2000

CA

** FOREIGN APPLICATIONS *****

NONE
 CA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/17/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 0	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>CA</u> Initials				

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TITLE

Amide substituted imidazopyridines

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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